

MENOMONEE FALLS HEALTH CARE CENTER

N84 W17049 MENOMONEE AVENUE

MENOMONEE FALLS 53051 Phone: (262) 255-1180

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/02): 104

Total Licensed Bed Capacity (12/31/02): 106

Number of Residents on 12/31/02: 101

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 102

Corporation

Skilled

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Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
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Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year				33.7
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years				54.5
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	9.9	More Than 4 Years				11.9
Day Services	No	Mental Illness (Org./Psy)	8.9	65 - 74	11.9				-----	
Respite Care	Yes	Mental Illness (Other)	3.0	75 - 84	37.6					100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	33.7	*****				
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.9	Full-Time Equivalent				
Congregate Meals	No	Cancer	4.0		-----	Nursing Staff per 100 Residents				
Home Delivered Meals	No	Fractures	11.9		100.0	(12/31/02)				
Other Meals	No	Cardiovascular	11.9	65 & Over	90.1	-----				
Transportation	No	Cerebrovascular	11.9	-----		RNs				10.7
Referral Service	No	Diabetes	2.0	Sex	%	LPNs				8.3
Other Services	No	Respiratory	5.0	-----		Nursing Assistants,				
Provide Day Programming for		Other Medical Conditions	41.6	Male	28.7	Aides, & Orderlies				37.8
Mentally Ill	No		-----	Female	71.3					
Provide Day Programming for			100.0		-----					
Developmentally Disabled	No				100.0					

## Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	11	100.0	284		67	95.7	114		2	100.0	112	16	100.0	156	0	0.0	0	2	100.0	273	98	97.0
Intermediate	---	---	---		3	4.3	94		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	3.0
Limited Care	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	11	100.0			70	100.0			2	100.0		16	100.0		0	0.0		2	100.0		101	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02				
		-----				
		% Needing				Total
Percent Admissions from:		Activities of	%	Assistance of	% Totally	Number of
Private Home/No Home Health	5.5	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0	94.1	5.9	101
Other Nursing Homes	3.4	Dressing	19.8	79.2	1.0	101
Acute Care Hospitals	86.9	Transferring	11.9	86.1	2.0	101
Psych. Hosp.-MR/DD Facilities	2.1	Toilet Use	14.9	85.1	0.0	101
Rehabilitation Hospitals	1.4	Eating	53.5	44.6	2.0	101
Other Locations	0.7	*****				
Total Number of Admissions	145	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter		9.9	Receiving Respiratory Care	0.0
Private Home/No Home Health	29.7	Occ/Freq. Incontinent of Bladder		59.4	Receiving Tracheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel		45.5	Receiving Suctioning	0.0
Other Nursing Homes	6.2				Receiving Ostomy Care	1.0
Acute Care Hospitals	23.4	Mobility			Receiving Tube Feeding	4.0
Psych. Hosp.-MR/DD Facilities	4.8	Physically Restrained		0.0	Receiving Mechanically Altered Diets	17.8
Rehabilitation Hospitals	0.0					
Other Locations	4.8	Skin Care			Other Resident Characteristics	
Deaths	31.0	With Pressure Sores		5.0	Have Advance Directives	99.0
Total Number of Discharges		With Rashes		0.0	Medications	
(Including Deaths)	145				Receiving Psychoactive Drugs	53.5

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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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	This Facility	Ownership: Proprietary		Bed Size: 100-199		Licensure: Skilled		All Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.2	81.9	1.17	88.6	1.09	84.2	1.14	85.1	1.13
Current Residents from In-County	50.5	83.1	0.61	85.4	0.59	85.3	0.59	76.6	0.66
Admissions from In-County, Still Residing	11.7	18.8	0.62	18.6	0.63	21.0	0.56	20.3	0.58
Admissions/Average Daily Census	142.2	182.0	0.78	203.0	0.70	153.9	0.92	133.4	1.07
Discharges/Average Daily Census	142.2	180.8	0.79	202.3	0.70	156.0	0.91	135.3	1.05
Discharges To Private Residence/Average Daily Census	42.2	69.3	0.61	76.5	0.55	56.3	0.75	56.6	0.75
Residents Receiving Skilled Care	97.0	93.0	1.04	93.5	1.04	91.6	1.06	86.3	1.12
Residents Aged 65 and Older	90.1	87.1	1.03	93.3	0.97	91.5	0.98	87.7	1.03
Title 19 (Medicaid) Funded Residents	69.3	66.2	1.05	57.0	1.22	60.8	1.14	67.5	1.03
Private Pay Funded Residents	15.8	13.9	1.14	24.7	0.64	23.4	0.68	21.0	0.75
Developmentally Disabled Residents	0.0	1.0	0.00	1.0	0.00	0.8	0.00	7.1	0.00
Mentally Ill Residents	11.9	30.2	0.39	28.5	0.42	32.8	0.36	33.3	0.36
General Medical Service Residents	41.6	23.4	1.77	28.9	1.44	23.3	1.79	20.5	2.03
Impaired ADL (Mean)	41.4	51.7	0.80	50.9	0.81	51.0	0.81	49.3	0.84
Psychological Problems	53.5	52.9	1.01	52.9	1.01	53.9	0.99	54.0	0.99
Nursing Care Required (Mean)	3.5	7.2	0.48	6.8	0.51	7.2	0.48	7.2	0.48